

H1N1 Flu Questions and Answers

Visit Flu.gov for More Information

Q. When will the 2009 H1N1 vaccine be widely available in my community?	. 1
Q: Is the H1N1 vaccine safe?	. 2
Q. If the number of flu cases are decreasing in my community, should I still get vaccinated?	2
Q: Should I get vaccinated against 2009 H1N1 if I have already had flu-like illness since the	
Spring of 2009?	. 2
Q: Who should get the H1N1 vaccine?	. 3
Q: How serious is the H1N1 flu?	. 3
Q: In addition to vaccination, are there other ways to prevent the spread of illness?	. 3
Q: Will there be enough pediatric Tamiflu to treat children who are ill?	. 4
Q: What has the government done to prepare for and respond to the H1N1 pandemic?	. 4
Q: Where can I get more information?	. 4

Q. When will the 2009 H1N1 vaccine be widely available in my community?

All states and the District of Columbia have placed orders for vaccine, and more orders are expected daily. Orders are coming in throughout the day; they're being processed and shipped, and vaccine is arriving in thousands of places across the country.

The vaccine situation changes rapidly and we are slowly seeing the gap between supply and demand begin to close. Because the vaccine distribution system varies by state, the vaccine situation on the ground may differ from community to community.

As of Friday, October 30, 2009, 26.6 million doses have been allocated. Each week, the Centers for Disease Control and Prevention (CDC) reports how much vaccine has been shipped to each state. You can find out how much H1N1 vaccine has shipped to your state at www.flu.gov.

Like the flu itself, flu vaccine production is notoriously unpredictable, and the 2009 H1N1 vaccine is taking longer to produce than manufacturers initially expected. We are all deeply saddened by the illness and death caused by the H1N1 flu, and we are frustrated by the long lines and production delays, but scientists, doctors, and manufacturers are working around the clock to produce this vaccine safely, effectively, and as quickly as the science allows.

The 2009 H1N1 vaccine was developed and began to be distributed across the country less than six months after H1N1 was first identified last April, which is significant since it often takes between six and nine months to make a vaccine.

Q: Is the H1N1 vaccine safe?

Clinical trials conducted by the National Institutes of Health and the vaccine manufacturers have shown that the new H1N1 vaccine is both safe and effective. The FDA has licensed it. There have been no safety shortcuts.

H1N1 vaccine is produced exactly the same way the seasonal flu vaccine is produced every year, using the only technique available to get the vaccine safely and quickly to the American people. The 2009 H1N1 flu is simply a new virus strain. In fact, had H1N1 struck this country earlier than this spring, the H1N1 strain probably would have been included as part of this year's seasonal flu shot.

Millions of Americans have been vaccinated against seasonal flu vaccine for years without any problems. Still, because some Americans have concerns about "new" vaccines, the National Institutes of Health and the vaccine manufacturers conducted more rigorous tests on the H1N1 vaccine than on other flu vaccines, and there were no red flags from these clinical trials.

Also, CDC has stepped up surveillance efforts to track the H1N1 vaccine and any possible adverse events. Since it is so closely related to the seasonal flu vaccine, we do not expect to see serious side effects. But we are taking all the necessary steps to promote and monitor safety.

Q. If the number of flu cases are decreasing in my community, should I still get vaccinated?

It is important that you get the vaccine as soon as it is available in your community. Flu pandemics are unpredictable, and often come in waves. There can be an increase in illness, then a decrease, then another increase and so forth. During the 1957 flu pandemic there was early rise in disease around September and October, and then there was another big wave of influenza illness after the first of the year. Getting vaccinated will help protect you against the H1N1 flu as it continues to spread throughout the country.

Q: Should I get vaccinated against 2009 H1N1 if I have already had flu-like illness since the Spring of 2009?

The symptoms of influenza (flu-like illnesses) are similar to those caused by many other viruses. Even when flu viruses are causing large numbers of people to get sick, other viruses are also causing illnesses.

If you were ill but do not know for sure that you had the 2009 H1N1 flu, you should get vaccinated when it is your turn, if your doctor recommends it.

In addition, unlike seasonal flu, H1N1 has not been widespread in seniors so far. However, doctors at the CDC are recommending that older people get both the H1N1 and the seasonal flu vaccines when it's their turn, just like everyone else.

Q: Who should get the H1N1 vaccine?

The Advisory Committee on Immunization Practices (ACIP)—an independent committee which advises CDC—recommended that novel H1N1 flu vaccine be made available first to the following five groups:

- o Pregnant women;
- o Health care workers and emergency medical responders;
- o People caring for infants under 6 months of age;
- o Children and young adults from 6 months to 24 years; and
- o People aged 25 to 64 years with underlying medical conditions (e.g. asthma, diabetes, neuro-muscular disorders).

Q: How serious is the H1N1 flu?

The flu is widespread in 48 states right now and continues to rise.

Many people will get a mild case of H1N1, but there are groups who are at high risk for serious complications. Some of them, such as teenagers and young adults, are not typically at risk from the flu, but are especially vulnerable to the 2009 H1N1 flu virus.

It is important that people with high risk for serious complications such as pregnant women, people under age 25, and those with asthma, diabetes or another underlying condition seek medical attention if they are sick and ask their doctor if a prescription for an anti-viral medicine is appropriate.

Q: In addition to vaccination, are there other ways to prevent the spread of illness?

Take these everyday steps to protect your health:

- o Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. If soap and water are not available, use an alcohol-based hand rub.
- o Avoid touching your eyes, nose or mouth. Germs spread that way.
- Stay home if you are sick until at least 24 hours after you no longer have a fever (100°F or 37.8°C) or signs of a fever (without the use of a fever-reducing medicine, such as Tylenol®).
- o Follow public health advice regarding school closures, avoiding crowds and other social distancing measures.

Q: Will there be enough pediatric Tamiflu to treat children who are ill?

As the H1N1 flu virus continues to spread, CDC is working with physicians and other health care providers to make sure children and adults who get sick can get the medicine they need, when they need it.

In the spring when the H1N1 flu virus first hit this country, the federal government released approximately 11 million doses of antiviral medication to the states. This consisted mostly of oseltamivir (Tamiflu®) and represented approximately 25 percent in the Strategic National Stockpile. Since then, we have replenished the stockpile. In October, Secretary Sebelius released an additional 300,000 doses of liquid pediatric Tamiflu from the stockpile to send to the states.

The Food and Drug Administration (FDA) and the maker of Tamiflu® have said that available supplies of liquid Tamiflu® for children are limited. If you cannot get liquid Tamiflu® for your child, a pharmacist can make a Tamiflu® suspension (liquid) using available Tamiflu® adult capsules. CDC is alerting pharmacists about this option and providing instructions on how to prepare a suspension using adult capsules. Children's doses of Tamiflu® are also available in capsules.

Q: What has the government done to prepare for and respond to the H1N1 pandemic?

After this spring's H1N1 outbreak, the U.S. government took aggressive steps to protect public health including:

- Launched a public education campaign to curb the spread of the disease, including Public Service Announcements, guidance for schools, businesses, and clinicians, and a new website: <u>flu.gov</u> to provide the latest information about the flu;
- o Released 25 percent of the Strategic National Stockpile of antivirals in the spring;
- Released 300,000 doses of pediatric oral suspension Tamilflu from the Strategic National Stockpile in October;
- o Developed a safe and effective H1N1 vaccine;
- o Began distributing the H1N1 vaccine across the country;
- o Authorized the use of a new anti-viral intravenous drug under for critically ill flu patients

Q: Where can I get more information?

Visit <u>Flu.gov</u> It's the government-wide, one-stop website for information about the flu. Flu.gov includes:

- A self-evaluation section where you can check your symptoms and help make decision about seeking treatment.
- A section on myths and facts about the flu to help people get accurate and timely information about the H1N1 flu and flu vaccine.

- A vaccine locator that can help you find out where to get the seasonal flu vaccine and H1N1 flu vaccine. The vaccine locator will continue to be updated as states and communities announce vaccination sites.
- Webcasts on what to do about the flu featuring doctors and scientists.
- o Educational tools like PSAs with Elmo in Spanish and English to teach kids about how to sneeze correctly and how parents need to come up with a plan in case their child gets ill.
- Handouts like our *Flu Essentials*, which are available in ten languages to share with neighbors and friends that outline critical early warning signs about the flu.

-###-